

Order #: 7155



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:



78415 (J)

M

1

JE

2017-01-11 08:46

JEFFERSON CITY, MO 65102

CES

Environmental Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-1-10

Collected Time: 05:30

PWS ID: MO1024118

Facility ID: DS

Sample Type: Bacteria

Sample Collection Point

Id:

Location:

(b) (6), (b) (7)(C)

Collector

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number:

68530

Free Chlorine:

Total Chlorine:

1.95

Collector Sign:

(b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling:

Yes

No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 7155



Pages in Order: 1 of 1

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REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:



78413 (J)



2017-01-11 08:46

ICES

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 1/1/10

Collected Time: 06:30

PWS ID: MO1024118

Facility ID: DS

Sample Type: Routine

Sample Collection Point ID: 04

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: —

Bottle Number: 68440

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 1.90

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
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<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 7155



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

25

MO

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JEFFERSON CITY, MO 64501



78414 (J)



2017-01-11 08:46

ES

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 1/7-1/10

Collected Time: 07:20

PWS ID: MO1024118

Facility ID: DS

Sample Type: Aesthetically

Sample Collection Point

Location:

(b) (6), (b) (7)(C)

Id:

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Collector:

Sample Category: Bacterial

Repeat Location:

Bottle Number: 68492

Free Chlorine:

(b) (6), (b) (7)(C)

Total Chlorine: 2.10

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes No

Evidence of Cooling:

Yes No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services

State Public Health Laboratory

101 N. Chestnut

PO Box 570

Jefferson City, MO 65102

<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 7155



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PMSD 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

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MO 2017-01-11 08:46
1101 RIVERSIDE DRIVE
JEFFERSON CITY, MO 65102

DES

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-1-16

Collected Time: 08:15

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 01

Location:

(b) (6), (b) (7)(C)

Collector:

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number: 69608

Free Chlorine:

Total Chlorine: 2.15

Collector Signature:

(b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes No

Evidence of Cooling:

Yes No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chesnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 7155



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

29



78399 (J)

MO

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2017-01-11 08:46

15

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 1-7-10

Collected Time: 08:50

PWS ID: MO1024118

Facility ID: DS

Sample Type: Lontis

Sample Collection Point: 05

Location: (b) (6), (b) (7)(C)

Id: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: —

Bottle Number: 69532

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 1.85

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
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SD 062015

Order #: 7155



Pages in Order: 1 of 1

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REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

10200

296



78398 (J)

MO:



110

2017-01-11 08:46

JEFFERSON CITY, MO 65102

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date:

17-1-10

Collected Time:

09:35

PWS ID: MO1024118

Facility ID: DS

Sample Type:

Point

Sample Collection Point

10

Location:

(b) (6), (b) (7)(C)

Id:

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Collector:

Sample Category: Bacterial

Repeat Location:

Bottle Number:

68479

Free Chlorine:

(b) (6), (b) (7)(C)

Total Chlorine:

1.95

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling:

Yes

No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
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Jefferson City, MO 65102
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SD 062015

Order #: 8503



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BIL'

29

MO

110

JEFFERSON CITY, MO 64501



85451 (J)



2017-02-16 08:39

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date:

17-2-15

Collected Time:

0:530

PWS Id: MO1024118

Facility Id: DS

Sample Type:

Routine

Sample Collection Point

02

Location:

(b) (6), (b) (7)(C)

Collector:

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

→

Bottle Number:

35854

Free Chlorine:

(b) (6), (b) (7)(C)

Total Chlorine:

2.63

Collector Signature

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling:

Yes

No

Date Printed: 2017-01-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chesnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 8503



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

2:



Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-2-15

Collected Time: 06:15

PWS ID: MO1024118

Facility ID: DS

Sample Type: Routine

Sample Collection Point: 04

Location: (b) (6), (b) (7)(C)

Collector ID: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number: 93278

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.1

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-01-20

Temperature (Celsius)

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____

Missouri Department of Health & Senior Services
State Public Health Laboratory
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SD 062015

Order #: 8503



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REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

296



MO 85450 (J)

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2017-02-16 08:39

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

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Complete or correct the following information

Collected Date:

1-7-2-15

Collected Time:

07:00

PWS ID: MO1024118

Facility ID: DS

Sample Type:

Routine

Sample Collection Point

12

Location:

(b) (6), (b) (7)(C)

Id: (b) (6), (b) (7)(C)

Collector:

Collector Phone:

(b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number:

86518

Free Chlorine:

(b) (6), (b) (7)(C)

Total Chlorine:

1.95

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes No

Evidence of Cooling:

Yes No

Date Printed: 2017-01-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
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SD 062015

Order #: 8503



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REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

296



85497 (J)

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2017-02-16 08:39

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date:

17-2-15

Collected Time:

07:55

PWS ID: MO1024118

Facility ID: DS

Sample Type:

Residual

Sample Collection Point

01

Location:

(b) (6), (b) (7)(C)

Id

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Collector:

Sample Category: Bacterial

Repeat Location:

Bottle Number:

03907

Free Chlorine:

(b) (6), (b) (7)(C)

Total Chlorine:

2.31

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling

Yes

No

Date Printed: 2017-01-20

Temperature (Celsius)

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
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SD 062015

Order #: 8503



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

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Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date:

17-2-15

Collected Time:

08:40

PWS Id: MO1024118

Facility Id: DS

Sample Type:

Routine

Sample Collection Point

05

Location:

(b) (6), (b) (7)(C)

Collector:

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number:

36446

Free Chlorine:

(b) (6), (b) (7)(C)

Total Chlorine:

2.42

Collector Sig:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes No

Evidence of Cooling:

Yes No

Date Printed: 2017-01-20

Temperature (Celsius)

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 8503



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

29

MO

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85496 (J)

2017-02-16 08:39

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date:

17-2-15

Collected Time:

09:15

PWS ID: MO1024118

Facility ID: DS

Sample Type:

Drinking

Sample Collection Point

Id:

(b) (6), (b) (7)(C)

Location:

(b) (6), (b) (7)(C)

Collector:

Collector Phone:

(b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number:

32344

Free Chlorine:

(b) (6), (b) (7)(C)

Total Chlorine:

1.99

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling:

Yes

No

Date Printed: 2017-01-20

Temperature (Celsius)

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
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SD 062015

Order #: 7155



Pages in Order: 1 of 1

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REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

296



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1101

JEFF.

2017-03-14 08:39

Environmental Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-3-13

Collected Time: 06:00

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 2

Location: (b) (6), (b) (7)(C)

Collector Id: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: —

Bottle Number: 86503

Free Chlorine: —

Total Chlorine: 2.58

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services

State Public Health Laboratory

101 N. Chestnut

PO Box 570

Jefferson City, MO 65102

<http://www.health.mo.gov/lab/index.php>

(b) (6), (b) (7)(C)



SD 062015

Order #: 7155



REPORT TO:

BILL TO:

Pages in Order: 1 of 1

178



2961



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

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JEFFER

90445 (J)
2017-03-14 08:39

Containers in Order: 1

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-3-13

Collected Time: 06:50

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 04

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: →

Bottle Number: 88429

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.01

Collector Signatu

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID



SD 062015

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>

Order #: 7155



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

296



90444 (J)

MO D

1101

JEFF

2017-03-14 08:39

Environmental Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date:

17-3-13

Collected Time:

07:35

PWS Id: MO1024118

Facility Id: DS

Sample Type:

Routine

Sample Collection Point

12

Id:

Location:

(b) (6), (b) (7)(C)

Collector:

(b) (6), (b) (7)(C)

Collector Phone:

(b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number:

88450

Free Chlorine:

Total Chlorine:

2.48

Collector Signature:

(b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes No

Evidence of Cooling:

Yes No

Date Printed: 2016-10-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 8503



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

2961



90449 (J)

MO DO

1101

JEFFERSON

2017-03-14 08:39

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-3-13

Collected Time: 08:15

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 01

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector P: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number: 88537

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.61

Collector Sign: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-01-20

Temperature (Celsius)

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____



SD 062015

Missouri Department of Health & Senior Services

State Public Health Laboratory

101 N. Chestnut

PO Box 570

Jefferson City, MO 65102

<http://www.health.mo.gov/lab/index.php>

Environmental
Sample Collection Form

Order #: 8503



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL

2961



90448 (J)



2017-03-14 08:39

MO D

1101

JEFFERSON CITY, MO 64501

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-3-13

Collected Time: 08:50

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 05

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: —

Bottle Number: 88468

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 1.98

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-01-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____

Missouri Department of Health & Senior Services

State Public Health Laboratory

101 N. Chestnut

PO Box 570

Jefferson City, MO 65102

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(b) (6), (b) (7)(C)



SD 062015

Order #: 8503



REPORT TO:

BILL TO:

Pages in Order: 1 of 1

178



2961

Containers in Order: 1

CASS CO PWSID 9

25902 SOUTHWOOD RD

HARRISONVILLE, MO 64701-0000

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JEFFERSON

**Requested Analyses/Tests****PUBLIC DRINKING WATER BACTERIAL ANALYSIS**

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 7-3-13

Collected Time: 09:30

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 10

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone:

Sample Category: Bacterial

Repeat Location: —

Bottle Number: 88498

Free Chlorine: —

Total Chlorine: 2.11

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling:

Yes

No

Date Printed: 2017-01-20

Temperature (Celsius)

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID



SD 062015

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services

State Public Health Laboratory

101 N. Chestnut

PO Box 570

Jefferson City, MO 65102

<http://www.health.mo.gov/lab/index.php>

(b) (6), (b) (7)(C)

Order #: 5612



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178

CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

2961

MO DE

1101

JEFFERSON



94677 (J)



2017-04-05 09:24

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-4-4

Collected Time: 06:00

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 02

Location: (b) (6), (b) (7)(C)

Id: (b) (6), (b) (7)(C)

Collector Phone:

Sample Category: Bacterial

Repeat Location:

Bottle Number: 86583

Free Chlorine:

Total Chlorine: 2.32

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-07-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
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SD 062015

Order #: 5612



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

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29

MO

110

JEFFERSON CITY, MO 64501



94608 (J)



2017-04-05 09:24

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date:

17-4-4

Collected Time:

06:45

PWS ID: MO1024118

Facility ID: DS

Sample Type:

Reservoir

Sample Collection Point

04

Location:

(b) (6), (b) (7)(C)

Id:

Collector:

(b) (6), (b) (7)(C)

Collector Phone:

Sample Category: Bacterial

Repeat Location:

Bottle Number:

88380

Free Chlorine:

Total Chlorine:

2.11

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling:

Yes

No

Date Printed: 2016-07-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID



SD 062015

Order #: 5612



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL

2961

MO DE
1101

JEFFERSON CITY, MO 65102



94609 (J)



2017-04-05 09:24

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-8-4

Collected Time: 07:40

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point Id: 09

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone:

Sample Category: Bacterial

Repeat Location:

Bottle Number: 86526

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.35

Collector Signature

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-07-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 5612



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL T

2961



94755 (J)

MO DEP

1101 R

JEFFERSON CITY, MO 65102



2017-04-05 09:24

Requested Analyses/Tests**PUBLIC DRINKING WATER BACTERIAL ANALYSIS**

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-4-4

Collected Time: 08:20

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point Id: 01

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone:

Sample Category: Bacterial

Repeat Location:

Bottle Number: 86595

Free Chlorine:

Total Chlorine: 2.10

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes

No

Evidence of Cooling:

Yes

No

Date Printed: 2016-07-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 5612



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

291



94753 (J)

MO

110

JEFF



2017-04-05 09:24

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-4-4

Collected Time: 08:55

PWS ID: MO1024118

Facility ID: DS

Sample Type: Routine

Sample Collection Point ID: 05

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone:

Sample Category: Bacterial

Repeat Location:

Bottle Number: 88479

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.36

Collector Signature:

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-07-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 5612



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:

2961



94754 (J)

MO DEI
1101 F
JEFFER



2017-04-05 09:24

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334.

Complete or correct the following information

Collected Date: 17-4-4

Collected Time: 09:25

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 10

Location: (b) (6), (b) (7)(C)

Id: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: (b) (6), (b) (7)(C)

Bottle Number: 86557

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 1.95

Collector Signat: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2016-07-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 9889



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO



103527 (J)

M



2017-05-11 08:43

JEFFERSON CITY, MO 64501

102577

CES

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334. To order additional collection kits, contact the MSPHL at 573-751-4830 or visit the website at <http://health.mo.gov/lab/specimentestforms.php>.

Complete or correct the following information

Collected Date: 5-7-10

Collected Time: 05:30

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point Id: 02

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: —

Bottle Number: 0272

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.12

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

CHS at
BIT

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-04-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____

Environmental
Sample Collection Form

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 9889



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

RII TO:



103528 (J)



2017-05-11 08:43

UPCES

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334. To order additional collection kits, contact the MSPHL at 573-751-4830 or visit the website at <http://health.mo.gov/lab/specimentestforms.php>.

Complete or correct the following information

Collected Date: 17-5-10

Collected Time: 06:30

PWS ID: MO1024118

Facility ID: DS

Sample Type: Routine

Sample Collection Point Id: 04

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: [REDACTED]

Sample Category: Bacterial

Repeat Location: [REDACTED]

Bottle Number: 10383

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.22

Collector Signature: [REDACTED]

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering:

Yes No

Evidence of Cooling:

Yes No

Date Printed: 2017-04-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID

BUILD ID

Missouri Department of Health & Senior Services

State Public Health Laboratory

101 N. Chestnut

PO Box 570

Jefferson City, MO 65102

<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 9889



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:



103529 (J)



JRCES

2017-05-11 08:43

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

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Complete or correct the following information

Collected Date: 17-5-10

Collected Time: 07:20

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point: 09

Location: (b) (6), (b) (7)(C)

Id: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number: 10205

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.05

Collector Sign: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-04-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____



SD 062015

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>

Order #: 9889



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:



103489 (J)



AGES

2017-05-11 08:43

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

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Complete or correct the following information

Collected Date: 17-5-10

Collected Time: 08:30

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point Id: 01

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: —

Bottle Number: 10301

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 2.40

Collector Signature: (b) (6), (b) (7)(C)

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-04-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

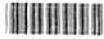
BUILD ID _____

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>



SD 062015

Order #: 9889



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BILL TO:



103488 (J)

2017-05-11 08:43

NR005

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334. To order additional collection kits, contact the MSPHL at 573-751-4830 or visit the website at <http://health.mo.gov/lab/specimentestforms.php>.

Complete or correct the following information

Collected Date: 17-5-10

Collected Time: 09:30

PWS ID: MO1024118

Facility ID: DS

Sample Type: Sensitive

Sample Collection Point Id: 05

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location: /

Bottle Number: 10364

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 1.95

Collector Signature: [Redacted]

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-04-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____

Missouri Department of Health & Senior Services
State Public Health Laboratory
101 N. Chestnut
PO Box 570
Jefferson City, MO 65102
<http://www.health.mo.gov/lab/index.php>

(b) (6)
(b) (7)(C)
(b) (7)(C)



SD 062015

Order #: 9889



Pages in Order: 1 of 1

Containers in Order: 1

REPORT TO:

178



CASS CO PWSID 9
25902 SOUTHWOOD RD
HARRISONVILLE, MO 64701-0000

BI'



2! 103487 (J)

MO



11 2017-05-11 08:43

JEFFERSON CITY, MO 65107

ES

1571487

Environmental
Sample Collection Form

Requested Analyses/Tests

PUBLIC DRINKING WATER BACTERIAL ANALYSIS

Total Coliform Bacteria and E. coli (Present/Absent Test)

PRINT LEGIBLY. Instructions for completing form are supplied in the Collection Kit. If desired, make a copy of the completed form for your records. For compliance monitoring questions, contact the Missouri Department of Natural Resources-Public Drinking Water Branch at (573) 751-5331 or your regional office. For laboratory test results or testing questions, contact the Missouri State Public Health Laboratory at (573) 751-3334. To order additional collection kits, contact the MSPHL at 573-751-4830 or visit the website at <http://health.mo.gov/lab/specimentestforms.php>.

Complete or correct the following information

Collected Date: 7-5-10

Collected Time: 09:55

PWS Id: MO1024118

Facility Id: DS

Sample Type: Routine

Sample Collection Point Id: 10

Location: (b) (6), (b) (7)(C)

Collector: (b) (6), (b) (7)(C)

Collector Phone: (b) (6), (b) (7)(C)

Sample Category: Bacterial

Repeat Location:

Bottle Number: 11542

Free Chlorine: (b) (6), (b) (7)(C)

Total Chlorine: 1.98

Collector Signature

County: CASS

For Laboratory Use Only -- Please do not write below this line

Received By:

pH:

Evidence of Tampering: Yes No

Evidence of Cooling: Yes No

Date Printed: 2017-04-20

Temperature (Celsius):

Bottles Received:

Thermometer ID:

BUILD ID _____

BUILD ID _____

Missouri Department of Health & Senior Services
State Public Health Laboratory
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SD 062015